

ICDS

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INTRODUCTION

- ICDS – Integrated Child Development Services
- What are Integrated in the program? And Why integrated?
- The program includes **beneficiaries of different ages** and provides both **Nutrition and health services for holistic development of children**

Nutrition + Health = ICDS

INTRODUCTION - HISTORY

- ICDS program prepared by Department of Social welfare
- ICDS started in 1975 as a project in 22 districts
- Expanded to 100 districts in 1978
- Expanded to all over the country in 1982 converted the project into program
- In 2005 Government of India started sharing 50% of financial expenditure

INTRODUCTION

- 1 Angan Wadi Centre for 400- 800 population
- 2 AWCs for 800 – 1600 population
- 3 AWCs for 1600 – 2400 population
- One mini AWCs for 150 – 400 population
- Anganwadi on demand – where a settlement has at least 40 children under 6 years but no AWC
- For Tribal and other difficult areas, 1 AWC for 300 – 800 population, 1 mini AWC for 150 -300 population

OBJECTIVES

- To improve Nutrition and Health status of Children in the age group 0-6 years
- To lay the foundations for proper psychological, physiological and social development of the child
- To reduce the mortality and morbidity, malnutrition and school drop out
- To achieve an effective coordination of policy and implementation among the various departments working for the promotion of child development
- To enhance the capability of the mother and nutritional needs of the child through proper nutrition and health education

BENEFICIARIES

- Children less than 3 years
- Children in age group 3 – 6 years
- Adolescent girls 11-18 years
- Pregnant women
- Nursing Women
- Other women 15 – 45 years

SERVICES

- Supplementary Nutrition
- Nutrition and Health Education
- Immunization
- Health Checkup
- Non formal pre-school education
- Schemes applied for adolescent girls

Total 6 Services

SUPPLEMENTARY NUTRITION

- Beneficiaries: Children below 6 years, nursing and pregnant mothers

Population	Calories	Protein
Children below 3 years	500 Calories	12 – 15 grams
Severely malnourished children below 3 years	800 Calories	20 – 25 grams
Pregnant and Nursing Women	600 Calories	18 – 20 grams
Adolescent girls	600 Calories	18 – 20 grams

SUPPLEMENTARY NUTRITION

- More than one meal should be provided in supplementary nutrition
- Morning snacks and one hot cooked meal
- Take home ration for children below 3 years, pregnant and nursing women
- All are eligible. Below poverty line is not a criteria. Scheme is universal
- Supplementary nutrition is given 300 days in a year on average 25 days per month

Category	Food items GOI-50%, State-50%	Food items from State Budget	
		For Non Tribal areas	For Tribal areas
Pregnant Women Lactating Mothers (THR- monthly)	Rice-3kgs Dhal-1kg Oil - 500ml Eggs - 25	Milk - 5 lts Nutrition Kit Rice flakes - 1kg Ragi Flour - 2kg Jaggery - 250 gms Ground nut chikki -250gms Dry dates - 250gms	Milk - 5 lts Nutrition Kit Multi grain Atta - 2kg Ragi Flour - 1kg Jaggery - 500 gms Ground nut chikki -500gms Dry dates - 500gms
6 to 36 months Children (THR- monthly)	Balamrutham — 2.5 kg Eggs - 30	Milk - 2.5 lts	Milk - 6 lts
36 to 72 months Children (HCM - daily at AWC)	Rice-75gms Dhal-15gms Oil - 5ml Egg - 1	Milk - 100ml per day	Milk - 200ml per day

NUTRITION AND HEALTH EDUCATION

- Nutrition education and health education is given to all women in the age group of 15 – 45 years, Priority to pregnant and nursing women
- **Conducting Village health nutrition days**
- Nutrition and Health Days are conducted twice every month for bringing awareness in public on the services provided at anganwadi centres viz.,
on **1st Firday** month with focus on Growth monitoring & THR
on **3rd Friday** with focus on providing immunization and ANC services by ANM and counselling the mothers.

IMMUNIZATION

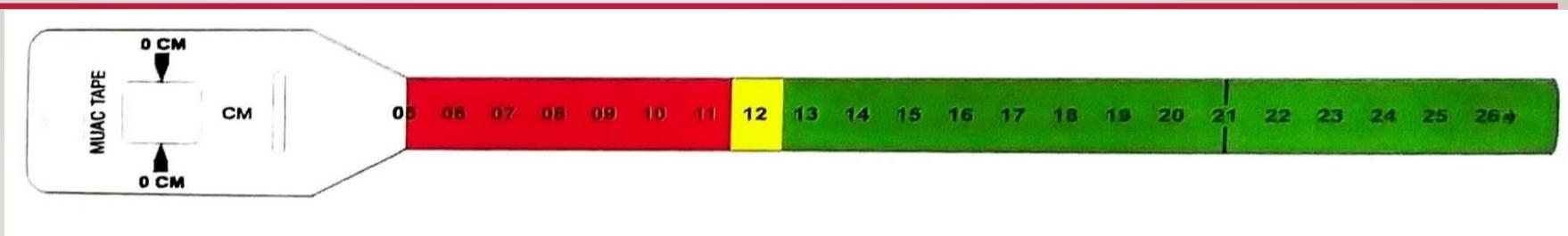
- Angan wadi workers will help health care providers to complete immunization of children and pregnant women
- For children – BCG, Hepatitis B, OPV, IPV, Pentavalent, Rotavirus & JE (In some states)
- For Pregnant women – Td vaccine
- Besides immunization IFA tablets along with protein supplements will be given to pregnant women

HEALTH CHECKUP

- Antenatal care of pregnant women
- Post natal care of nursing mothers
- Care of new born infants
- Care of children under 6 years of age
- A minimum of three physical examinations will be done for pregnant women
- High risk mothers will be referred to higher centres

HEALTH CARE OF CHILDREN

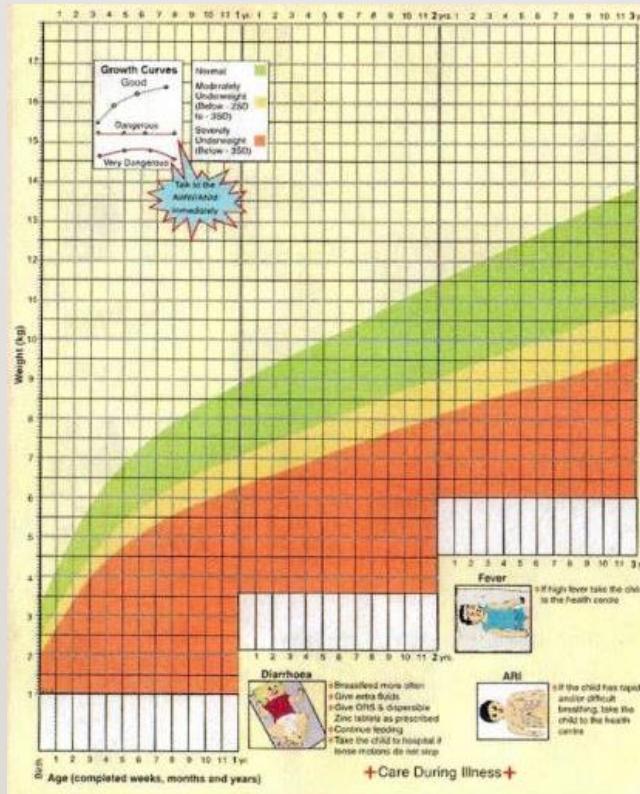
- Record of height and weight at periodic intervals
- Watch over milestones
- Immunizations
- General Checkups every 3 – 6 months to detect disease, malnutrition etc
- Treatment for diseases like diarrhoea, dysentery, RTI etc which are widely prevalent
- Deworming



Shakeers tape

Salters hanging weighing scale

GROWTH CHARTS – ROAD TO HEALTH



HEALTH CARE OF CHILDREN

- Prophylaxis against Vitamin A deficiency and anaemia
- Referral of serious cases to hospital has also been provided
- Health records of the children, antenatal care and delivery card are maintained
- A card containing the health record of child is given to the mother

NON FORMAL PRESCHOOL EDUCATION

- Children between age groups 3 – 6 years are imparted non formal preschool education
- Locally produced toys and material are used in organizing play and creativity
- Developed PP-1 and PP-2 work books
- **Poshan Bhi Padhai Bhi**

SCHEMES FOR ADOLESCENT GIRLS

- Kishori shakti yojana
- Nutrition program for adolescent girls – 6Kgs food grains will be provided for each beneficiary
- SABALA – Rajiv Gandhi scheme for empowerment of adolescent girls
- IGMSY – Indira Gandhi Matritva Sahayog Yojana

ORGANOGRAM

- One ICDS project for 100000 population in Urban/ Rural areas, For 35000 in Tribal areas
- Child Development Officer (CDPO) is in charge of ICDS project
- 4 Supervisors will work under CDPO
- Each supervisor will be in charge of 20- 25 AWCs
- Each AWC contains one Angan Wadi Worker (AWW) and one helper
- AWW will coordinate with PHC staff for providing health care services

INDICATORS TO ASSESS IMPACT OF AWC

- Increased Birth weight
- Reduced incidence of malnutrition
- Increased immunization coverage
- Reduced infant and child mortality rates

Mission Poshan 2.0: 14408
Women Helpline: 181

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Jan Andolan

Language

Mission Shakti

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Key Services

Report for Mar 2025

SNP (Supplementary Nutrition Programme)

Total Beneficiaries
31,00,503

 27,81,731  3,18,772
Eligible Beneficiaries Opted Out



SNP
Given for at least 15 Days
19,91,771
 73.00%  26.00%
THR HCM



SNP
Given for at least 21 Days
17,82,570
 81.00%  18.00%
THR HCM



SNP
Given for at least 25 Days
14,51,723
 99.00%  0.00%
THR HCM

Growth Monitoring (Children 0-6 Years)



Children Measured (0 - 6 Years)
25,95,835



Stunting
Severely/Moderately Stunted
17.00%



Underweight
Severely/Moderately Underweight
7.00%

THANK YOU

